ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION			1/2/2	
FEE DETERMINATION O.I.P.E. CLASSIFIER	Sinc	4/2	2/2/2	
FORMALITY REVIEW		 70	1/3/04	
RESPONSE FORMALITY REVIEW		59158	8-18-00	
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INDEX OF CLAIMS

~	Rejected	N Non	-elected
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_	(Through numeral) Canceled	А Арр	eal
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-Carry Silia. L

بمسالميتينا فيسالهم المحجو ليبيعا تيسما يسيم اسيمالي ميحدالسيان المجموعية بمواسية مقاريت مقازا يمسدان فيفراني فالإراقية

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Claim Date	Claim	Date	Claim	Date					
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Best Available Copy

If more than 150 claims or 10 actions staple additional sheet here